

**COMMONWEALTH OF KENTUCKY
TREY GRAYSON
SECRETARY OF STATE**



APPLICATION FOR REGISTRATION OF FOREIGN BUSINESS TRUST

Pursuant to the provisions of KRS Chapter 386, the undersigned hereby applies for registration on behalf of the business trust named below and for that purpose submits the following statements:

1. The name of the business trust is

_____.

2. _____ is the state or country of establishment.

3. _____ is the date of establishment.

4. The name of the registered agent is

and the street address of the registered office in Kentucky is

Street City State Zip Code

5. The address of the principal office is

Address City State Zip Code

6. The name and the business address of each trustee is

_____ Name	_____ Address
_____ Name	_____ Address
_____ Name	_____ Address

(Attach a continuation sheet, if necessary)

7. A duly authenticated copy of the declaration of trust accompanies this application.

Signature

Type or Print Name & Title

Date: _____, 20____

Application for Registration of Foreign Business Trust Filing Instructions

FOREIGN BUSINESS TRUST NAME

State the name of the foreign business trust as filed in the state or country in which the business trust is established.

STATE OF ESTABLISHMENT

The state of establishment is the state or country under whose law the business trust was established.

DATE OF ESTABLISHMENT

The date of establishment is the date the business trust was established.

REGISTERED AGENT AND REGISTERED OFFICE ADDRESS

The registered agent may be an individual resident of Kentucky, a Kentucky corporation, a Kentucky nonprofit corporation or a foreign corporation, or a foreign nonprofit corporation authorized to transact business in this state.

The registered office address must be a Kentucky address and contain a street address or other specific location (Highway, Rural Route, Building etc.). A mailing address consisting of only a post office box is not sufficient for the registered office address.

PRINCIPAL OFFICE ADDRESS

The business trust must list a principal office address.

TRUSTEES

List the name and business address of each trustee. Attach a continuation sheet, if necessary.

AUTHENTICATED COPY

A certified copy of the declaration of trust duly authenticated by the Secretary of State of the domiciled state must accompany this application. The certified copy must be an original and must not be older than six (6) months. A photocopy is not acceptable.

WHO MAY SIGN

One trustee must sign the application for registration of foreign business trust.

NUMBER OF COPIES

Submit one originally signed and two exact or conformed copies of the application for registration. (May be a photocopy). Two file-stamped copies will be returned as evidence of the filing. One file-stamped copy must then be filed with the county clerk of the county in which the registered office is situated.

FILING FEE

The filing fee is \$15.00

Your check should be made payable to "Kentucky State Treasurer".

MAILING ADDRESS

Trey Grayson
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718

OFFICE LOCATION

Room 154, Capitol Building
700 Capital Avenue
Frankfort, KY 40601

WEB SITE ADDRESS

Our home page address is <http://www.sos.state.ky.us/>

Click on "On Line Business Database" for information on status of all business entities in Kentucky. Forms are also available on our web site.

For name availability, call (502) 564-2848, press 2, and then press 1.

For further information, call (502) 564-2848 press 2, and then press 5 or try our web site.